01/11/2009 16:43 5152446467

IA ETH FOR INSTRUCTIONS, SEE BACK OF FORM FORM DISCLOSURE SUMMARY PAGE DR-2 DISCLOSURE COMMITTEE NAME (Must be same as on Statement of Organization) 2009 JAN 12 (Rev. 12/2005) REPORT AM 8: 2B For Office Use Only Hockensmith for Supervisor Comm. # IMPORTANT: Indicate by # type of committee you are reporting for: 5 (1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party Logged In (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Scanned Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (11) Local Ballot Issue CANDIDATE COMMITTEES ONLY: Computer Audited Candidate Name Political Party (If applicable) Tom Hockensmith File with: Democrat lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Office Sought District (if Senate or House) Polk County Supervisor Des Moines, Iowa 50319 Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code section 68B.32A(7) Fax: 515-281-3701 the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the dividual responsible for filing timely and accurate reports. SIGNATURE OF PERSON BILING REPORT 01/01/2008 - 12/31/2008 I AM FILING A REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate by # 2 CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.) County & Local Committees, enter County In which Election is held Pok STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	21,722.79		
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	5,946.65		
Schedule F: Loans Received total (Attach Schedule F)	0,00		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00		
(Schedule H applies to Candidates' Committees Only)			
SUB-TOTAL\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD	27,669.44		
Schedule B: Expenditures total (Attach Schedule B) (*"also see debts and loans below)	2,762.16		
Schedule F: Loan Repayments total (Attach Schedule F)	0.00		
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	24,907.28		
**UNPAID BILLS (From Schedule D - Attach Schedule D)	0.00		
**************************************	0.00		
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	0.00		
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES ✓ NO		
CANDIDATE COMMITTEES ONLY:	_ 100100		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	0.00		
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.			

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Hockensmith for Supervisor

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#				INCOME
01/31/2008	CK#	William McCarthy 5201 SE 32nd Des Moines, IA 50320		\$50.00	
	10#	Des Moines, IA 30320		<u> </u>	
01/31/2008	CK#	Community State Bank PO Box 127		4.62	
	ID#	Ankeny JA 50021			
02/29/2008	GK#	Community State Bank PO Box 127 Ankeny, IA 50021		2,95	
	ID#	Alikelly, IA 30021		<u> </u>	
03/31/2008	CK#	Community State Bank PO Box 127		2.77	
	ID#	Ankeny, IA 50021			
04/30/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 50021		2.67	
	ID#				
05/30/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 50021		2.63	
	ID#				
06/30/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 20021		2.67	
	ID#				
07/19/2008	CK#	David Hawkins 615 SE Titus Des Moines, IA 50315		25.00	1
	ID#			ļ	
07/19/2008	CK#	Unitemized		150.00	1
	ID#				
07/31/2008	CK#	Community State Bank PO Box 127 Ankeny, IA50021		2.77	
			SUB-TOTAL	s 246.08	
		TOTAL (# last pag	e of this schedule)	· T	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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For Instructions,	See	Back	of	Form
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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
Hockensmith for Supervisor	ı

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

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CAUTION: Section 688.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
07/19/2008	ID# CK#	Mark Hedberg 100 E Court Ave Suite 425 Des Moines, IA 50309		\$500.00	INCOME.
07/19/2008	ID#	TM Franklin Cownie 675 Harwood Drive Des Moines, IA 50312		25.00	~
07/19/2008	ID#	Linda Steele 4080 NE 46th Street Des Moines, IA 50317		25.00	1
07/19/2008	tD# CK#	Victoria Campbell 20 Liberty Bell Blvd. Pleasant Hill, IA 50327		100.00	7
07/19/2008	ID#	William Ryan 2611 E 29th Street Des Moines, IA 50317		25.00	1
07/19/2008	CK#	John Tyler 317 E Marion Des Moines, IA 50315		25.00	1
07/19/2008	1D# 6113 CK# ₀₀₄₀₆₅	AFSCME/Iowa Public Employees Council 61 People Account, 4320 NW 2nd Ave Des Moines, IA 50313		500.00	~
07/19/2008	ID# CK#	Deborah Farnsworth 3503 E 43rd Court Des Moines, IA 50317		25,00	1
07/19/2008	ID# CK#	Daniel Benshoof 1516 SE Lacona Des Moines, IA 50315		265.00	1
07/19/2008	ID# CK#	Sue Foster 405 SE 7thStreet Ankeny, IA 50021		25.00	4
			SUB-TOTAL	e 1515.00	

TOTAL (if last page of this schedule)

of (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumeme of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions,	Sae	Back	of	Form	
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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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COMMITTEE NAME (Must be same as on Statement of Organization)	
Hockensmith for Supervisor	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS	
CHECK THIS BOX IF AMENDING FORM		

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AFSCME IA COUNCIL 61

Reset Form

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (# applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER
	ID#				INCOME
07/19/2008	CK#	Jon Woods 204 3rd St NE Mitchellville, IA 50169		\$25.00	1
	ID#	Witchenville, 1A 30169			
07/19/2008	CK#	David Wieslander 305 Mill Street SW Mitchellville, IA 50169		200.00	1
	ID#	70163			
07/19/2008	CK#	Ed Wieslander PO Box 56 Mitchellville, IA 50169		100.00	1
	ID#	Terretroller, IA 30109			
07/19/2008	CK#	John Rowen 1414 8th Ave SE		100.00	1
	10#	Altona IA 50009	 		
07/19/2008	CK#	Jean Tannatt 813 N Shadview Blvd Pleasant Hill, IA 50327-2015		20.00	1
	ID#	1 leasant Fills, 1A 30327-2015			
07/19/2008	CK#.	Dick Dearden 3113 Kinsey Des Moines, IA 50317		25.00	1
,	ID#		·		
07/19/2008	CK#	Skip Conkling PO Box 308 Altoona, IA 50009		200.00	√
	ID#		+		
07/19/2008	CK#	Virginia Rowen 3407 Crocker Des Moines, IA 50312		25.00	4
	ID#				
07/19/2008	CK#	Jorry Overman 445 NW 49th Place Des Moines, IA 50313	brother-in-law	100.00	1
	ID#				
07/19/2008	CK#	Pamela Appleby 1321 E 27th Court Des Moines, IA 50317		100.00	1
			SUB-TOTAL		
				\$ 895.00	
		TOTAL (if last page	of this schedule)		

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If summarie of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of //

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) Hockensmith for Supervisor

5152446467

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS	
CHECK THIS BOX IF AMENDING FORM		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IDWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER
07/19/2008	ID#	Geri Huser PO Box 367 Altoona, IA 50009		\$200.00	INCOME
07/19/2008	ID#	Sheryl Norman 2611 E 29th Des Moines, IA 50317		25.00	V
07/19/2008	CK#	Kathleen Hamre 14146 Pinnacle Point Clive, IA 50325		125.00	_
07/19/2008	ID#	Jeannette Woods 3504 4th Des Moines IA 50313		20.00	✓
07/19/2008	ID#	Robert Stradley 2801 Arthur Des Moines, IA 50317		25.00	1
07/19/2008	CK#	Larry Land 6048 Terrace Drive Johnston, IA 50131		250.00	1
07/19/2008	ID# CK#	David Lockridge 2031 Maple Circle W Des Moines, IA 50265-4295		250.00	1
07/19/2008	ID# CK#	Robert Mahaffey 2220 E 32nd Street Des Moines, IA 50317		25.00	1
07/19/2008	ID# CK#	Roger Middleton 5101 SE Aster Court Ankeny, IA 50021		50.00	✓
7/19/2008	ID# CK#	Deborah Babb 1660 Copper Creek Court Pleasant Hill, IA 50327		100.00	4

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(for Schedule A)

TOTAL (If last page of this schedule)

For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	1.00001	A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Hockensmith for Supervisor			CK THIS BOX IF YOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE). LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MMOD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER
07/19/2008	ID# CK#	Jack Blackford 9500 Twin Eagles Drive Johnston, IA 50131		\$25.00	INCOME
07/19/2008	ID#	David DeBoefe 6926 NE Halbrook Ankeny, IA 50021		10.00	/
07/19/2008	ID# CK#	Connie Ewing RR 3 Box 45B Leon, IA 50144		10.00	7
07/19/2008	ID#	Mike McCabe 471 NE 60th Des Moines, IA 50313		10.00	1
07/19/2008	ID# CK#	Duane Huinker 8003 NE 88th St Bondurant, IA 50035		10,00	1
07/19/2008	CK#	Dixon Benshoof 432 S Union Des Moines, IA 50315		25,00	1
07/19/2008	ID# CK#	Ron Hull 5470 NE 6th Des Moines, IA 50313		10.00	1
07/19/2008	CK#	Tim Herold 2102 NE Logan Ankeny, IA 50021		25.00	1
07/19/2008	ID# CK#	Brian Oldson 4025 11th Place Des Moines, IA 50313		10.00	1
07/19/2008	ID# CK#	Lee Overman 3011 Mansfield Des Moines, IA 50317	mother-in-law	25.00	1
		TOTAL (if last p	SUB-TOTAL age of this schedule)	\$ 160.00	

of_ (for Schedule A)

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

5152446467

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COMMITTEE NAME / Must be come as a State	
COMMITTEE NAME (Must be same as on Statement of Organization)	
Washersonish Son S	
Hockensmith for Supervisor	}

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IDWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#				INCOME
07/19/2008	CK#	Michael Smith 2509 48th		\$20.00	1
	ID#	Des Moines, IA 50310			<u> </u>
07/19/2008	CK#	Tamyra Harrison 4425 NE 108th Street Mitchellville, IA 50169		10.00	1
	ID#				<u></u>
07/19/2008	CK#	Paul Harrison 4425 NE 108th Street Mitchellville, IA 50169		10.00	1
	ID#	Michelly Ine, (A 50109			
07/19/2008	CK#	Donna MacNeir PO Box 42 Eikhart, IA 50073		10.00	1
	ID#				
07/19/2008	CK#	Rick Hutchins 6896 150th Avenuc Indianola, IA 50125		10.00	1
	ID#	Indianola, IA 30125			
07/19/2008	CK#	Ryan Ballard 3315 SW 13th Place Des Moines, IA 50315-7535		10.00	1
	ID#				
07/19/2008	CK#	Kirk Winders 3512 E 43rd Cout Des Moines, IA 50317		70.00	1
	ID#				
07/19/2008	ÇK#	Nancy and Dick Hudnall 2432 B Hull Aveue Des Moines, IA 50317		25.00	✓
	ID#	Des fetolites, 1A 30317			
07/19/2008	CK#	Bart Kennedy 8714 Primrose Lane Clive, IA 50325		30.00	1
	ID#				
07/19/2008	CK#	Bob Rice 12207 Ridgement Urbandale, IA 50322		30.00	1
	-		SUB-TOTAL		
				\$ 225.00	
		TOTAL (If last page	e of this schedule)	e ·	

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Page 6 // (for Schedule A)

SCHEDULE

Reset Form

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

5152446467

(Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Hockensmith for Supervisor		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

GAUTION: Section 66B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#	Phil Hildebrand			INCOME
08/04/2008	CK#	300 Edgewood Lane Pleasant Hill, IA 50327-2027		\$25.00	V
	ID#	1 10400011 TITE, 1A 30327-2027			
08/04/2008	CK#	Carolyn Wilkins 428 Tyler Drive		25.00	1
	ID#	Pleasant Hill, IA 50327			ļ <u> </u>
08/04/2008	CK#	Penny Bellnap 5440 E Oakwood Drive Pleasant Hill, IA 50327		25.00	1
	ID#	1 1 June 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
08/04/2008	CK#	Martha Miller 5230 E Oakwood Drive		25.00	4
	ID#	Pleasant Hill, IA 50327			
08/04/2008	CK#	James Fitzgerald 3036 E Diehi		50.00	1
	ID#	Des Moines, IA 50320			
08/04/2008	CK#	Lisa Tunks 2601 E 39th Des Moines, IA 50317		50.00	1
	10#				
08/04/2008	CK#	Patricia Umthum 11651 NW 121st Street Granger, IA 50109-9754		20.00	*
	ID#				
08/04/2008	CK#	Julie Haggerty 9916 Tanglewood Drive Urbandale, IA 50322		25.00	4
	TD#				
08/04/2008	CK#	Patty Plummer 1245 E 36th Des Moines, IA 50317		25.00	✓
-	ID#		 		
08/04/2008	ĊK#	Amy Horman 7858 Boulder Court W Des Moines, IA 50266-2665		25.00	1
			SUB-TOTAL		
			· .	\$ 295.00	
		TOTAL (# last page	e of this schedule)		

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Page / or or (for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Hockensmith for Supervisor

5152446467

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
CHE!	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAG (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE- (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#				INCOME
08/04/2008	CK#	Barbara Post-Althaus 1510 Thompson Des Moines, IA 50316		\$25.00	V
	TD#	200 Fromes, 1A 30310			
08/04/2008	CK#	Dolores Evans 1230 10th Ave NW Altoona, IA 50009		100.00	1
	ID#	· · · · · · · · · · · · · · · · · · ·			
08/04/2008	CK#	Michael Mauro 4325 SW 31st Street Des Moines, IA 50321		50.00	1
·	ID#	Des Montes, IX 30321			
08/04/2008	CK#	Rosemary Moody 5285 E Oakwood Drive Pleasant Hill IA 50327		50.00	1
	ID#	Figuration IA 50327			
08/04/2008	CK#	James Brick 6701 Westown Pkwy #100 W Des Moines, IA 50266		100.00	✓
	ID#	W Des Mones, IA 30206			
08/04/2008	CK#	Carl Wicderaenders 4312 Kingman Blvd		100.00	1
	ID#	Des Moines, IA 50310			
08/04/2008	CK#	R. Dowey 608 Leach Den Meiner IA 60216		10.00	/
	ID#	Des Moines, IA 50315			
08/04/2008	CK#	Melissa Spaur 501 Broad Des Moines, IA 50315		10.00	1
	ID#				
08/04/2008	CK#	Marilyn Spina 2545 E Ovid Des Moines, IA 50317		20.00	4
	1D#	OGS 171011165, 1A 3031 /			
08/04/2008	CK#	Steven Siegel 411 N Court Ottumwa, IA 52501-2645		50.00	1
 			SUB-TOTAL		
			OUT IOIAL	\$ 515.00	

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Page 8 of A

TOTAL (if last page of this schedule)

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) Hockensmith for Supervisor

5152446467

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DDYR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#				INCOME
08/04/2008	CK#	Brian Morlam 1239 Creston Des Moines, IA 50315		\$20.00	1
	ID#	Des Moines, 1A 30315			
08/04/2008	CK#	John Chiodo 2809 Emma Des Moines, IA 50321		25.00	V
	ID#		 		ļ
08/04/2008	CK#	Steve Mauro 3224 Summit Vista Drive		10.00	1
	ID#	Des Moines, IA 50321-2228			
08/04/2008	CK#	Tony Lemmo 1220 SW Creston		10.00	V
	ID#	Der Moiner 14 50315			
08/04/2008	CK#	Ken Agey 3121 SW 32nd Place		10.00	1
	1D#	Des Moines, IA 50321-1454			
08/04/2008	CK#	Linda Cateron 5578 E Oakwood Drive		10.00	>
	ID#	Pleasant Hill. IA 50327			
08/04/2008	CK#	Bill Lack 5230 E University		25.00	1
	ID#	Pleasant Hill. IA 50327			
08/04/2008	CK#	John Lerdal 2017 35th		20.00	1
	ID#	Des Moines, IA 50310			
08/04/2008	CK#	Kenny Doar 435 Shaffor		10.00	✓
	ID#	Pleasant Hill IA 50327			
08/04/2008	CK#	unitemized		130.00	1
	,,,		SUB-TOTAL	.,,	
			-30-101VF	e 270.00	

TOTAL (if last page of this schedule)

of II (for Schedule A)

[&]quot;Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

5152446467

For Instructions, See Back of Form CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Hockensmith for Supervisor Reset Form. A (Rev. 07/03) CHECK THIS BCX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND RAISER
	ID#				INCOME
08/04/2008	CK#	Tony Bisignano 2618 E Leach Des Moines. IA 50320		\$100.00	1
	1D#	Des Montes. 1A 30320			
08/04/2008	CK#	Joseph Aiello 3700 Walcott Avenue Des Moines, IA 50321		200,00	✓
	ID#	Des Moines, IA 30321		ļ <u></u>	
08/04/2008	CK#	Mark Amedeo 1326 56th Des Moines, IA 50311		20.00	1
	ID#		_		
08/04/2008	CK#	Jim Maloney 3940 River Oaks Drive Des.Moines, JA 50312-4639		20.00	1
	ID#		-		
08/04/2008	CK#	Ken Shufelt		10.00	1
	ID#	TY Des Intollies, IA 50265			
08/04/2008	CK#	Nancy Albright-Andrews 1407 Linden Lane Des Moines, IA 50315-3348		10.00	\
	ID#	505 Mones, 12 50515-3346			
08/29/2008	CK#	Community State Bank PO Box 127		2.96	
	ID#	Ankeny, IA 50021			- .
09/03/2008	CK#	George Cataldo 5554 NE 16th Street Des Moines, IA 50313		250.00	
	ID#				
09/17/2008	CK#	R. E. Davis PO Box 22220 Clive, IA 50325		100.00	
	1D#				
09/30/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 50021		3.31	
			SUB-TOTAL		·
			1	\$ 716.27	
		TOTAL (If last pag	e of this schedule)		

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page (for Schedule A)

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Hockensmith for Supervisor

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IDWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#	Suzette Jensen			INCOME
10/04/2008	CK#	3127 Thompson Avenue Des Moines, IA 50317-3145		\$100.00	<u> </u>
***	TD#	5-00 Montes, 171 50517-5145			
10/10/2008	CK#	Community State Bank PO Box 127 Ankeny IA 50021		<100.00>	
	1D#	Alikely IA 30021			
10/10/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 50021		<7.50>	
	ID#				<u> </u>
10/21/2008	CK#	unitemized		50.00	
,	ID#				
10/31/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 50021		<0.45>	
	ID#				
10/31/2006	ск#	Community State Bank PO Box 127 Ankeny, IA 50021		3.18	
	ID#			· · · · · · · · · · · · · · · · · · ·	
11/28/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 50021		2.87	
***	ID#				
11/28/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 50021		<2.39>	
	ID#	111111111111111111111111111111111111111			
12/31/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 50021		<i>5</i> .58	
	ID#				
2/31/2008	CK#	Community State Bank PO Box 127 Ankeny, IA 50021		<9.797	
			SUB-TOTAL		

TOTAL (if last page of this schedule)

* Disclosure law requires conditate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE, A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Hockensmith for Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
07/31/2008	ID# CK#	SE Polk Booster Club 8379 NE University Avenue Pleasant Hill, IA 50327	Dollars for Scholars donation	\$ 250.00
08/05/2008	ID# CK#	Staples 3500 8th Street SW Altoona, IA 50009	printer cartridge for treasurer	134.61
9/02/2008	ID# CK#	Capitol City Mini Storage 2222 Guthrie Ave Dos Moines, IA 50317	storage unit rent	38.16
9/12/2008	ID# CK#	Pleasant Hill Chamber of Commerce 5160 Maple Drive Suite C Pleasant Hill, IA 50327	Labor Day Festival Advertising	250.00
9/30/2008	ID# CK#	Capitol City Mini Storage 2222 Guthric Ave Des Moines, IA 50317	Storage unit rent	38.16
0/01/2008	ID# CK#	Polk County Democrats PO Box 5102 Des Moines, IA 50306	donation	100.00
1/02/2008	ID# CK#	Capitol City Mini Storage 2222 Guthrie Avc Des Moines, IA 50317	storage unit rent	38.16
2/02/2008	ID# CK#	Capitol City Mini Storage 2222 Guthrie Ave Des Moines, IA 50317	storage unit rent	38.16
			SUB-TOTAL	\$ 887.25
			TOTAL (If last page of this schedule)	\$ 2762.16

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

B	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Hockensmith for Supervisor

DATÉ EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
06/12/2008	CK#	Altoona Herold 100 8th Street SE Altoona, IA 50009	SE Polk graduation sponsor	\$ 305.00
07/01/2008	ID# CK#	Capitol City Mini Storage III 2222 Guthric Avenue Des Moines, IA 50317	rental unit	38.16
07/15/2008	ID# CK#	Pleasant Hill Chamber of Commerce 5106 Maple Drive Suite C Pleasant Hill, IA 50327	2008 Golf outing sponsorship	150.00
07/19/2008	ID# CK#	Amanda Tyler 111 Court Avenue Room 100 Des Moines, IA 50309	paper goods, plastic ware, food condiments for picnic	290.80
07/19/2008	ID# CK#	Dan Riley 111 Court Ave Room 100 Des Moines, IA 50309	beverages lawn bags for picnic	186.44
07/19/2008	ID#	Dick Hudnall 2432 E Hull Des Moincs, IA 50317	hamburgers for pionic	91.45
07/31/2008	ID# CK#	Tom Hockensmith 3502 E 43rd Court Des Moines, IA 50317	reimbursement for postage	67.86
05/30/2008	ID# CK#	Capitol Cit Mini Storage III 2222 Guthrie Avenue Des Moines, IA 50317	rental unit	38.16
	·		SUB-TOTAL	\$ 1167.87

TOTAL (if last page of this schedule)

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail iterrized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

\$CHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES		
CHECK THIS BOX IF AMENDING FORM			

COMMITTEE NAME (Must be same as on Statement of Organization)

Hockensmith for Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01/31/2008	ID# CK#	Capitol City Mini Storage III 2222 Guthric Avenue Des Moines, IA 50317	rental unit	\$ 38.16
03/02/2008	ID# CK#	Capitol City Mini Storage III 2222 Guthrie Avenue Des Moines, IA 50317	rental unit	38.16
03/27/2008	ID# CK#	City of Pleasant Hill 5106 Maple Drive Suite A Pleasant Hill, IA 50327	shelter rental for July fundraiser	50.00
4/01/2008	ID# CK#	Capitol City Mini Storage III 2222 Guthrie Avenue Des Moines, IA 50317	rental unit	38.16
4/30/2008	ID#	Polk County Democrats PO Box 5102 Des Moines, IA 50305	donation	250.00
5/03/2008	ID# CK#	Capitol City Mini Storage III 2222 Guthrie Avenue Des Moines, IA 50317	rental unit	38.16
5/21/2008	ID# CK#	Carter Printing 1739 E Grand Des Moines, IA 50316	family picnic/fundraister tickets postcards	216.24
5/30/2008	ID# CK#	Capitol Cit Mini Storage III 2222 Guthrie Avenue Des Moines, IA 50317	rental unit	38.16

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Purchases of certain campaign property costing \$500 or more must also be Inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

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TOTAL (If last page of this schedule)